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ABSTRACT

A survey was conducted of 338 professional members of the National Therapeutic Recreation Society (NTRS) to identify deterrents to participation in continuing professional education. The four top ranked factors in deterring participation were cost, work constraints, lack of quality, and lack of benefit, followed by family constraints and disengagement (i.e., level of orientation toward the desirability and importance of learning). These factors are thought to be within the direct control of program planners. Suggestions are offered for improving participation, by lowering program fees, making available financial aid or scholarships, incorporating delayed or installment payment systems, offering varied and flexible scheduling, implementing distance learning, making provisions for self-pacing, conducting an educational needs assessment of NTRS members, and creating awareness-oriented promotions. (Contains 50 references.)
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DETERRENTS TO PARTICIPATION IN CONTINUING PROFESSIONAL EDUCATION
AND IMPLICATIONS FOR FUTURE EDUCATIONAL PROGRAM PLANNING

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Deterrents to Participation in Continuing Professional Education
and Implications for Future Educational Program Planning

Presented by Stephen J. Langsner, Re.D., CTRS

American Alliance of Health, Physical Education,
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Importance of Continuing Professional Education

The maintenance of professional competence in therapeutic recreation (TR) has traditionally been addressed through practitioner participation in continuing professional education (CPE) programs. The importance of CPE, relative to occupational competence, growth, and development has been acknowledged extensively in the literature.

Lauffer (1977) stated "no 'once forever' education can prepare people in the human services professions for the complexities of their work" (p. xiii). People who do not keep up with the mainstream of their occupational groups will eventually experience a decrease in competency as their knowledge and skills become obsolete. Building on this notion, Langsner (1984), described professional obsolescence as "specific knowledge, skills, and performance in a particular field which is no longer useful, effective, or accepted by current standards of practice within that area of expertise" (p.30). He further stated that it could be eliminated through continuing education.

Unterreiner (1979), suggested that a continuing education program's main purpose was to help participants become more effective in their present and future work, through the development of appropriate habits of skill and knowledge related

to specific job performance. Carter and James (1979), reinforced Unterreiner's position and said that through participation in a comprehensive continuing professional development program, an individual can reinforce and expand entry level knowledge and skills, and strengthen professional capacities. In further support, Kempfer (1980), stated "We are learning that knowledge is not something acquired once and for all. Knowledge becomes obsolete. To continue your education is to keep up with the times" (p.2). Finally, Henderson (1981, p.5), maintained that "The maintenance of knowledge and the growth of skills is critical to being a professional... the obligation of being professional necessitates continuing education beyond the formal college professional preparation."

Recent research has indicated the felt need for continuing professional education among parks and recreation professionals to be fairly strong. Colton & Nolde (1991), in a mailing to the NRPA membership, presented an analysis of open ended responses to questions which were included in the 1991 NRPA Needs Assessment Survey. To the question "What are the most important issues that you see facing the park, recreation, and leisure service profession?" Continuing education ranked sixth in the number of responses. Within the category of Continuing Education, responses which stated "more and better education needed," ranked second.

Structured educational seminars, conferences, and classes are the most often used formats for offering CPE opportunities. State, regional, and national professional associations in TR are the most likely sponsors of CPE programs, and in most cases,

attendance at sanctioned CPE activities results in the acquisition of a pre-determined amount of continuing education units (CEU's) (MacNeil, Teague, & Cipriano, 1989).

Mandatory Continuing Professional education

The announcement in early 1991 of the Certified Therapeutic Recreation Specialist (CTRS) Recertification Program (NCTR, 1991) obliged all currently certified TR professionals to participate in mandatory continuing professional education in two of three possible renewal combinations. During a five year period, practitioners must choose one of three possible pairs of recertification components (professional experience, continuing education, and reexamination), and earn a minimum number of points in each in order to renew their certification. Two of the three possible combinations require a specific number of documented, earned continuing education points (CEP's). If the combination of professional experience and continuing education is selected, the practitioner must earn 50 CEP's in a five year period. If continuing education and reexamination is paired, the practitioner must earn 30 CEP's in five years.

This requirement in TR evolved from the public demand for professional accountability in the delivery of health care services which began in the 1960s. This demand has been responsible for the enactment of mandatory relicensure laws in many allied professions (Scanlan, 1982). According to Scanlan, "a confluence of public pressure, governmental intervention, and professional acquiescence transformed a relatively simple system intended to facilitate professional updating into a complex

mechanism designed to assure professionals' competence" (Cervero & Scanlan, 1985, 11).

According to Rockhill (1981), the purpose of mandatory continuing professional education (MCPE) is to control, which entails requirements and sanctions. Supporters of MCPE see social control as necessary to assure the public of continuing professional competence. Mandatory continuing professional education acts as a means to control the quality of a particular profession by controlling the knowledge of the members of the profession. Without MCPE, accountability is impossible. Moreover, forcing professionals to continue their education is viewed as a form of consumer protection in the sense that if professionals are forced to remain up-to-date about new technologies, techniques, and practices, consumers can rest assured that the services they receive are of good quality (Young, 1984).

Opponents of MCPE have argued that professionals continue their education every day by virtue of their job, and there is no proof that MCPE increases proficiency in the field (W. Young, 1981). Rockhill (1981) is opposed to MCPE because it limits individual freedom, puts efficiency before ethical considerations, limits learning, and perpetuates the use of education for social control rather than maximization of learning.

There are those who feel that MCPE may actually limit learning. It is generally believed that individuals learn more when intrinsically motivated rather than extrinsically motivated (Young, 1984). Sullivan (1981), felt that while continuing education is needed to insure development of knowledge and

skills, MCPE provides no criteria for deficiencies in a profession. Individuals may not know their inadequacies and MCPE may not identify them. Moreover, Sullivan said the quality of programs is not always addressed. A person may choose the continuing education points for a number of reasons, closeness to home, cost, time, and interest in the subject. A professional may have interest, but not in the area where he or she may be lacking. Attendance in any program might be done just to qualify for recertification with no real sense of dedication.

Bullock and Carter (1981), recognized continuing education as a primary vehicle for ensuring continued as well as improved competence of professionals in therapeutic recreation. Moreover, they viewed it as a partial solution to certification and recertification concerns.

Ray (1979) invited 378 participants of the 1978 Midwestern Symposium on Therapeutic Recreation to complete a written questionnaire designed to assess a number of variables including attitudes toward continuing education and value of continuing education. He found most subjects were committed to continued learning, and felt strongly that continuation as a certified or registered professional should be dependent upon evidence of continuing education activity.

Cato (1982) surveyed 230 parks and recreation professionals' attitudes toward MCPE. She found that while 75% strongly believed in continuing education, 51% felt it should be voluntary and only 29% felt it should be mandatory.

Whether one supports or opposes the inherent values of

mandatory continuing professional education, it is now a reality in therapeutic recreation. One must acknowledge its existence and the profession must make the most of it.

Deterrents to Participation in CPE

According to Rockhill (1983), the study of participation in educational programs can serve as a basis for reaching professionals more effectively. This is an area of knowledge which is central to the study of continuing education (Grotelueschen, 1985; Rubenson, 1982).

Theory-oriented research on participation has stressed the identification of learner types, motives, and motivational orientations (Boshier, 1971; Boshier & Collins, 1985; Burgess, 1971; Houle, 1961; Sheffield, 1964). It is believed this kind of research holds promise for improving practice and policy making (Cervero & Scanlan, 1985; Scanlan & Darkenwald, 1985). Despite all the attention focused on what impels participation, few early studies of comparable sophistication have examined what deters it. This is interesting since the construct of deterrent or barrier occupies a central place in most theories or models of participation (Cross, 1981; Darkenwald & Merriam, 1982; Miller, 1967; Nordhaug, 1987; Rubenson, 1977).

Early investigations in general adult education addressed deterrents to participation through intuitive typologies (Cross, 1979), or descriptive surveys and interviews which generated long lists of discrete barriers, the most severe of which included cost, lack of time, inconvenient scheduling, and job responsibilities (Dao, 1975; Carp, Peterson & Roelfs, 1974;

Johnstone & Rivera, 1965). Research on reasons for non-participation in health professions continuing education has generally reported similar findings as those obtained in general adult education. However, differences in context have produced a more complex picture of profession-specific deterrents (Scanlan & Darkenwald, 1984). Physicians reported difficulty in obtaining practice coverage (Daniel, 1978; Lemon, 1973; Robertson & Dohner, 1970); selected allied health professionals noted that their employers often do not grant release time (Broski & Upp, 1979; Hightower, 1973; Karp, 1992); and nurses have identified family responsibilities (O'Kell, 1986) and non-work related commitments (Blais, Duquette & Painchaud, 1989).

Recent professional literature of adult education has given increased attention to deterrents to participation through both conceptual analysis (Cross, 1981) and factor analysis (Darkenwald & Valentine, 1985; Hayes & Darkenwald, 1988; Scanlan & Darkenwald, 1984). This research has proven useful for understanding the broad dimensions that deter participation by forming logically derived categories or empirically derived deterrent factors (Valentine & Darkenwald, 1990).

The work by Scanlan and Darkenwald (1984) which resulted in the development of the Deterrents to Participation Scale (DPS) provided empirical evidence for a multidimensional conceptualization of the deterrents construct. Moreover, the factors identified in the study indicated that these dimensions included logically interpretable groupings of psychosocial and environmentally-related constraints to participation. The six groupings of deterrent factors were (1) disengagement, (2) lack

of quality, (3) family constraints, (4) cost, (5) lack of benefit and (6) work constraints.

When examining participation of professionals in therapeutic recreation CPE, particularly since CEU accumulation is now mandatory in two of three recertification combinations, CPE program sponsors must not only consider reasons for participation, which can guide program and content decisions (Langsner, 1993), they must examine what deters participation. This is so particularly since according to Scanlan & Darkenwald (1984), four of the six deterrent factors (lack of quality, cost, lack of benefit, and work constraints) reflect, in part, potential participant perceptions related to CPE programming. These four deterrent factors can be addressed by those who plan and institute therapeutic recreation CPE programs.

Knowing the factors deterring professionals from participating in CPE would assist in the accommodation of individual needs and unique characteristics of the clientele. This knowledge has both practical and social significance. Without the knowledge, the system of CPE would remain unresponsive to the needs of the constituency (Scanlan, 1982).

This session presents data from a recent study which identified deterrents to participation in CPE experienced by professional members of the National Therapeutic Recreation Society (NTRS). Using a current roster (January, 1993) of professional members, a stratified proportional random sample (by region) representing 30% of the NTRS membership ($N = 536$), was invited to participate in the study. The sample was stratified by

region because the researcher believed geographic differences might exist concerning deterrents to professionals' participation in CPE. These differences could impact decisions regarding local programming.

The survey mailing consisted of a cover letter explaining the research, an invitation to participate, the questionnaire, and a stamped return envelope. Two weeks after instruments began returning, those subjects not responding to the initial mailing were sent a second survey.

The instruments used were the Deterrents to Participation Scale (DPS) (Scanlan & Darkenwald, 1984) and the Participant Information Form (PIF) (Grotelueschen, Harnisch, & Kenny, 1979). The DPS is a 40 item self-report instrument that states in present tense deterrents to participation in continuing professional education. A five point Likert-type scale is used to measure the relative importance (1 = not important, 2 = slightly important, 3 = somewhat important, 4 = quite important, 5 = very important) assigned to each deterrent statement. Each of the 40 items relate to one of the six deterrent factors.

The items comprising the factor Disengagement, reflect perceptions related to one's general level of activity and involvement, self-discipline, and orientation toward the desirability and importance of learning. Implicit in this group of statements are connotations of inertia, boredom, uncertainty, diffidence, apathy, and alienation. The items in the Lack of Quality factor represent both generalized and specific perceptions of programmatic inadequacies. They denote dissatisfaction with the quality of available programs. The items

comprising the Family Constraints factor consist mainly of perceptions related to the influence of extraoccupational responsibilities on participation, particularly those related to the familial role and role expectations. The Cost factor relates to the role and impact that cost plays as a deterrent to participation. The items in the Lack of Benefit factor consist of perceptions of the relative worth and need for participation in organized continuing education. Items in the final factor Work Constraints consist mainly of perceptions related to conflicting demands on the respondents' work time, particularly scheduling difficulties.

The Participant Information form (PIF), was used to collect relevant demographic data of two basic types. First, it obtains data on dimensions common to all professionals (e.g., gender, income level, age, years in the profession). These data are used to judge inferences to all professionals and for providing basic descriptive data for future program marketing and advertising. Second, it was modified to collect data on dimensions which were TR profession specific (e.g., practice setting, clients served).

Descriptive analyses were used to assess the relative importance attributed to deterrents to participation in CPE among the sample. One-way ANOVAs were used to determine what relationships (if any) existed among individual person-related characteristics and each of the six deterrent factors to participation and among individual profession-related characteristics and each of the six deterrent factors to participation in CPE.

Study Findings

The overall response rate of those members who returned completed survey instruments after two mailings was 68% ($N = 366$). Of those returned, 338 (63%) were used in data analysis. The magnitude of the return rate from each region (range = 64% to 76%) indicated that results were representative of the professional membership of the NTRS.

Cronbach's alpha coefficient was obtained for the forty items comprising the Deterrents to Participation Scale. The overall instrument reliability was .89 for this sample. A reliability coefficient also was calculated for each deterrent factor. For the factor representing disengagement, $\alpha = .80$; for lack of quality, $\alpha = .77$; for family constraints, $\alpha = .79$; for cost, $\alpha = .72$; for lack of benefit, $\alpha = .81$; and for work constraints, $\alpha = .67$.

The sample as a whole, identified the items representing the "Cost" factor as their most important deterrents to participation in CPE ($M=2.97$, $SD=0.87$). The items representing the "Work Constraints" factor was second ($M=2.79$, $SD=0.91$). Items representing the "Lack of Quality" factor was ranked third ($M=2.61$, $SD=0.96$), followed by items pertaining to the "Lack of Benefit" factor ($M=2.18$, $SD=0.82$), the "Family Constraints" factor ($M=2.17$, $SD=0.86$), and the "Disengagement" factor ($M=1.80$, $SD=0.73$).

Discussion and Recommendations

A majority of the importance ratings (item means) were low, ranging between "Not important" and "Slightly Important," i.e.,

between the scale values 1 and 2. This pattern of low item means also characterized previous research using the Deterrents to Participation Scale as well as similar instruments designed to identify motivational orientations (Boshier, 1971; Darkenwald & Valentine, 1985; Scanlan, 1982; Scanlan & Darkenwald, 1984). According to Darkenwald and Valentine (1985), this may suggest that a person's decision not to participate in continuing professional education is due to the combined or synergistic effects of multiple deterrents, rather than just one or two in isolation.

There may be several other explanations for this pattern of low item means. First, subjects responding to the survey but not involved in CPE activities, may not wish to be perceived as violating the social and professional norms associated with the value and importance attributed to participating continuing professional education. If this is so, the results may reflect this circumstance (Scanlan, 1982). Second, the items representing the deterrent factors in the DPS may not have been as important to the sample as others yet to be identified. Finally, it may be that current therapeutic recreation CPE participation is as good as it is going to get.

The four top ranked deterrent to participation factors (cost, work constraints, lack of quality, lack of benefit) may reflect in part, practitioner perceptions related to program characteristics. They are within the direct control of program planners. The Cost factor was ranked by the respondents as the number one deterrent to participation. Subsequent analyses revealed direct service providers (42% of the sample) indicated

program location a significant deterrent while those earning \$24,999 or less (29.4% of the sample) cited expensive fees as a significant deterrent to participation. In order to address this problem and facilitate increased participation of the NTRS professional membership in CPE, responses by those who plan programs might include lowering program fees, making available financial aid or scholarships, or incorporating delayed or installment payment systems (Valentine & Darkenwald, 1990).

The Work Constraint factor was ranked as the number two deterrent to participation by practitioners with subsequent analyses revealing number of years in TR as a significant variable related to program scheduling conflicts. Moreover, rankings of items revealed program availability conflicts, practice demand conflicts, and program coverage shortages created important deterrents to participation. Consequently, it would seem important for TR program planners to pay careful attention to time considerations when scheduling educational activities for the NTRS professional membership. To make CPE more accessible to practitioners, such proven strategies as varied and flexible scheduling, distance learning, and provisions for self-pacing might be implemented (Valentine & Darkenwald, 1990).

The Lack of Quality factor was ranked as the number three deterrent to participation by practitioners with subsequent analyses revealing practitioner characteristics of position, education level, and number of years in TR as significant variables related to perceptions of poor quality, inappropriately geared program levels, and irrelevant content for practice needs.

These findings may indicate a lack of information on the part of program planners which could be remedied through an educational needs assessment of NTRS members. These findings may also stem from a lack of information about program offerings by potential learners which can be addressed through awareness-oriented promotions.

The Lack of Benefit factor was ranked fourth as a deterrent to participation. Close examination of the ranked items reveal most reflect issues related to cost, time, and quality. Remedies previously stated may assist in removing these deterrents.

It is interesting to note that female practitioners indicated the statement from the Lack of Quality factor "Because the programming tends to be of poor quality" and the statement from the Lack of Benefit factor "Because there are few incentives or rewards for my participation" as more significant deterrents to participation than their male counterparts did. Are quality and benefit issues related to CPE gender specific? Does the fact that the membership in the NTRS is 80 percent female impact on this finding? Perhaps further inquiry would yield explanation.

Data appear to indicate that regional differences (though not statistically significant) existed among the membership relative to what specific items in factors were important deterrents to their participation in CPE. Future use of the DPS in individual regions and states may prove useful to planners of CPE programs on those levels. A variety of region and state specific strategies may be required to remove existing deterrents to participation.

The PIF will need some revision before it is used again with

the DPS, particularly as it relates to the family constraints deterrent factor. In light of the changing demands and make-up of the American family structure, i.e., single head of households, number of children, age of dependents, and other family obligations, the instrument needs adjustment to be more sensitive to respondents' family life cycle.

Since mandatory continuing professional education is a factor in two of three certification renewal combinations in TR, many of the deterrents to participation described in this study could interfere with NTRS professional members' ability to meet the requirements for recertification. The development of programs that address recognized professional issues, respond to the specific needs of participants, and remove significant deterrents to participation, should be a major objective of the NTRS. If the profession is to continue its emphasis on accountability and professionalization through continuing professional education, identifying and removing the deterrents to NTRS professional members' participation in CPE can make significant contributions toward the achievement of those efforts.

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